



Dart Aerospace Ltd.  
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**RBW6500X01611-W142F-3T**

**Job Sheet 198291**



**Part No:** RBW6500X01611-W142F-3T

**Job Qty:** 1 pcs **2**

**Part Name:** Oil Seal Removal Press Tool



**Part Weight:** 0 lbs

**Status:** New

**Priority:** Medium

**Job Created:** 7/24/19

**Job Tracking No:**

**Due Date:** 9/13/19

**Created By:** Marie Lajeunesse

**Type:** SOLD

**Description:**

**Note:** DWG RBW6500X01611-W142F-3T Rev. 2 IPP Rev. A 18.09.25 New issue DP Verify DD

**Ship Via:**

### Bill of Materials

### Job Routing

| Op No | Operation                   | Qty   | Start Date | Due Date | Standard  |         | Workcenter/Supplier   |           | Sign-off            |
|-------|-----------------------------|-------|------------|----------|-----------|---------|-----------------------|-----------|---------------------|
|       |                             |       |            |          | Setup Hrs | Run Hrs | Workcenter / Supplier | Lead Time |                     |
| 100   | Small Fab - 1               | 1 pcs | 9/13/19    |          | 0.00      | 0.08    | Small Fab - 1         |           |                     |
|       |                             |       |            |          |           |         | Small Fab - 2         |           |                     |
|       |                             |       |            |          |           |         | Small Fab - 3         |           |                     |
|       |                             |       |            |          |           |         | Small Fab - 4         |           |                     |
|       |                             |       |            |          |           |         | Small Fab - 5         |           |                     |
|       |                             |       |            |          |           |         | Small Fab - 6         |           |                     |
|       |                             |       |            |          |           |         | Small Fab - 7         |           |                     |
| 110   | QC 5                        | 1 pcs | 9/13/19    |          | 0.00      | 0.00    | QC 5 - 10             |           | SD 19-09-18.        |
|       |                             |       |            |          |           |         | QC 5 - 12             |           |                     |
|       |                             |       |            |          |           |         | QC 5 - 17             |           |                     |
|       |                             |       |            |          |           |         | QC 5 - 18             |           |                     |
|       |                             |       |            |          |           |         | QC 5 - 19             |           |                     |
|       |                             |       |            |          |           |         | QC 5 - 22             |           |                     |
|       |                             |       |            |          |           |         | QC 5 - 24             |           |                     |
|       |                             |       |            |          |           |         | QC 5 - 3              |           | SEP 18 2019 40 9-89 |
|       |                             |       |            |          |           |         | QC 5 - 43             |           |                     |
|       |                             |       |            |          |           |         | QC 5 - 49             |           |                     |
|       |                             |       |            |          |           |         | QC 5 - 51             |           |                     |
|       |                             |       |            |          |           |         | QC 5 - 58             |           |                     |
|       |                             |       |            |          |           |         | QC 5 - 68             |           |                     |
|       |                             |       |            |          |           |         | QC 5 - 9              |           |                     |
|       |                             |       |            |          |           |         | QC 5 - 50             |           |                     |
|       |                             |       |            |          |           |         | QC 5 - 30             |           |                     |
|       |                             |       |            |          |           |         | QC 5 - 40             |           |                     |
|       |                             |       |            |          |           |         | QC 5 - 61             |           |                     |
|       |                             |       |            |          |           |         | QC 5 - 81             |           |                     |
| 130   | Packaging 3-1 - Stock - B4B | 1 pcs | 9/13/19    |          | 0.00      | 0.00    | Packaging 3 - 1 - B4B |           |                     |
|       |                             |       |            |          |           |         | Packaging 3 - 2 - B4B |           |                     |
|       |                             |       |            |          |           |         | Packaging 3 - 3 - B4B |           |                     |
|       |                             |       |            |          |           |         | Packaging 3 - 4 - B4B |           |                     |
|       |                             |       |            |          |           |         | Packaging 3 - 5 - B4B |           |                     |

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|                |       |         |           |  |                        |                                        |
|----------------|-------|---------|-----------|--|------------------------|----------------------------------------|
|                |       |         |           |  | Packaging 3 - 6 - B4B  |                                        |
|                |       |         |           |  | Packaging 3 - 7 - B4B  |                                        |
|                |       |         |           |  | Packaging 3 - 8 - B4B  |                                        |
|                |       |         |           |  | Packaging 3 - 9 - B4B  |                                        |
|                |       |         |           |  | Packaging 3 - 10 - B4B |                                        |
|                |       |         |           |  | Packaging 3 - 11 - B4B |                                        |
|                |       |         |           |  | Packaging 3 - 12 - B4B |                                        |
|                |       |         |           |  | Packaging 3 - 13 - B4B |                                        |
|                |       |         |           |  | Packaging 3 - 14 - B4B |                                        |
|                |       |         |           |  | Packaging 3 - 15 - B4B |                                        |
|                |       |         |           |  | Packaging 3 - 16 - B4B |                                        |
|                |       |         |           |  | Packaging 3 - 17 - B4B |                                        |
|                |       |         |           |  | Packaging 3 - 18 - B4B |                                        |
|                |       |         |           |  | Packaging 3 - 19 - B4B |                                        |
|                |       |         |           |  | Packaging 3 - 20 - B4B |                                        |
|                |       |         |           |  | Packaging 3 - 21 - B4B |                                        |
|                |       |         |           |  | Packaging 3 - 22 - B4B |                                        |
|                |       |         |           |  | Packaging 3 - 23 - B4B |                                        |
|                |       |         |           |  | Packaging 3 - 24 - B4B |                                        |
|                |       |         |           |  | Packaging 3 - 25 - B4B |                                        |
|                |       |         |           |  | Packaging 3 - 26 - B4B |                                        |
|                |       |         |           |  | Packaging 3 - 27 - B4B |                                        |
|                |       |         |           |  | Packaging 3 - 28 - B4B |                                        |
|                |       |         |           |  | Packaging 3 - 29 - B4B |                                        |
|                |       |         |           |  | Packaging 3 - 30 - B4B |                                        |
|                |       |         |           |  | Packaging 3 - 31 - B4B |                                        |
|                |       |         |           |  | Packaging 3 - 32 - B4B |                                        |
|                |       |         |           |  | Packaging 3 - 33 - B4B |                                        |
|                |       |         |           |  | Packaging 3 - 34 - B4B |                                        |
|                |       |         |           |  | Packaging 3 - 35 - B4B |                                        |
|                |       |         |           |  | Packaging 3 - 36 - B4B |                                        |
| 140 QC 21 - FG | 1 pcs | 9/13/19 | 0.00 0.00 |  | QC 21 - FG - 21        | Total<br>SEP 23 2019<br>DAS 70<br>9-89 |
|                |       |         |           |  | QC 21 - FG - 70        |                                        |
|                |       |         |           |  | QC 21 - FG - 53        |                                        |

closed w/ JR

Part Op 100 - (Small Fab) Pick bag and tag  
 Descriptions: 110 - (QC5- Inspect part completeness to step on W/O)  
 130 - (Identify as per dwg & Stock Location: \_\_\_\_\_)  
 140 - (QC21- Final Inspection - Work Order Release)

## Job BOM

| Part / Item              | Component Name      | Quantity     | Operation         | Container |
|--------------------------|---------------------|--------------|-------------------|-----------|
| RBW6500X01611-W142F-3T-1 | Press Tool          | 3 pcs (1 ea) | 100-Small Fab - 1 | 5208499   |
| RBW6500X01611-W142F-3T-3 | Two Half Press Tool | 1 pcs (1 ea) | 100-Small Fab - 1 | 5268591   |
| RBW6500X01611-W142F-3T-5 | Seat                | 1 pcs (1 ea) | 100-Small Fab - 1 | 5207775   |

## Job Allocations

| Operation         | Component Part           | Required | Inventory | Allocated |
|-------------------|--------------------------|----------|-----------|-----------|
| 100-Small Fab - 1 | RBW6500X01611-W142F-3T-1 | 1        | 0         | 0         |
|                   | RBW6500X01611-W142F-3T-3 | 1        | 0         | 0         |
|                   | RBW6500X01611-W142F-3T-5 | 1        | 0         | 0         |

## Part Specifications

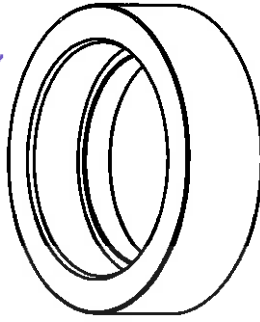
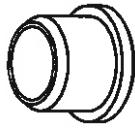
Specifications could not be found.

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| REVISIONS |         |                                                       |                                           |
|-----------|---------|-------------------------------------------------------|-------------------------------------------|
| REV       | ECR     | DESCRIPTION                                           |                                           |
| 1         |         | -1 ADDED ENGRAVE P/N, CHD DIM WAS Ø2.500 IS (Ø2.500). | DATE INITIAL APPROVED<br>9/28/2012 RJC SE |
| 2         | 15-0166 | -3 ADDED ENGRAVE P/N AND MATCHING ID NUMBER NOTE      | 7/19/2015 RJC JAG                         |

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BY ORDER  
198291 M55  
190725



-5

-3

-1

NOTE:  
1. PART OF KIT RBW6505G00331-3T.



TITLE  
OIL SEAL REMOVAL PRESS TOOL

|                                     |  |                                   |  |                  |   |
|-------------------------------------|--|-----------------------------------|--|------------------|---|
| DWG NO.                             |  | RBW6500X01611-W142F-3T            |  | REV              | 2 |
| MATERIAL                            |  | DRAWN BY: PERRITT                 |  | APPROVED         |   |
| UNLESS OTHERWISE SPECIFIED          |  | DIMENSIONS ARE IN INCHES          |  | FRACTIONS ± 1/16 |   |
| XX ± .006                           |  | XX ± .01                          |  | XX ± .1          |   |
| 1. BREAK ALL SHARP EDGES .016 x 45° |  | 2. DIMENSIONAL LIMITS APPLY AFTER |  | PLATING          |   |
| B/O INFORMATION OR SPECIFICATIONS   |  | PG.                               |  | USED ON MODEL    |   |
| 1. PRESS TOOL                       |  | 1                                 |  | AWI 39           |   |
| 2. TWO HALF PRESS TOOL              |  | 3                                 |  | SHEET 1 OF 4     |   |
| 3. SEAT                             |  | 4                                 |  | SCALE 1:4        |   |
| DATE 12/31/2008                     |  | DATE 12/31/2008                   |  | DATE 12/31/2008  |   |

Entered: \_\_\_\_\_

Date: \_\_\_\_\_

**WORK ORDER NON-CONFORMANCE / ROUTE UPDATE**

NCR No. \_\_\_\_\_

Route update only ☐

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                          |                                                                                                                        |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                          |                       |                          |                                                                                 |                          |                       |                          |          |                          |                     |                          |                     |                          |               |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |  |  |                 |                          |               |                          |                  |                          |                  |                          |         |                          |                       |                          |               |                          |                   |                          |          |                          |           |                          |                 |                          |         |                          |        |                          |                      |                          |      |                          |        |                          |                              |                          |                                 |                          |                    |                          |                   |                          |               |                          |             |                          |                 |                          |         |                          |            |                          |              |                          |                |                          |  |  |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|------------------------------------------------------------------------------------------------------------------------|--------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|-----------------------|--------------------------|---------------------------------------------------------------------------------|--------------------------|-----------------------|--------------------------|----------|--------------------------|---------------------|--------------------------|---------------------|--------------------------|---------------|--------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|--|-----------------|--------------------------|---------------|--------------------------|------------------|--------------------------|------------------|--------------------------|---------|--------------------------|-----------------------|--------------------------|---------------|--------------------------|-------------------|--------------------------|----------|--------------------------|-----------|--------------------------|-----------------|--------------------------|---------|--------------------------|--------|--------------------------|----------------------|--------------------------|------|--------------------------|--------|--------------------------|------------------------------|--------------------------|---------------------------------|--------------------------|--------------------|--------------------------|-------------------|--------------------------|---------------|--------------------------|-------------|--------------------------|-----------------|--------------------------|---------|--------------------------|------------|--------------------------|--------------|--------------------------|----------------|--------------------------|--|--|
| Job: _____<br>Part No. _____                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                          | DISPOSITION<br>Rework <input type="checkbox"/><br>Scrap <input type="checkbox"/><br>Use-as-is <input type="checkbox"/> |                          | DEPARTMENT/PROCESS<br>Skid-tube <input type="checkbox"/> Cross tube <input type="checkbox"/> Eng. (Non-AW) <input type="checkbox"/> Engineering <input type="checkbox"/><br>Machining <input type="checkbox"/> Small Fab <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Water Jet <input type="checkbox"/><br>Large Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/><br>Quality <input type="checkbox"/> |                          |                       |                          | Date : _____    Sequence #: _____    QTY Affected : _____    MRB (QS1042) _____ |                          |                       |                          |          |                          |                     |                          |                     |                          |               |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |  |  |                 |                          |               |                          |                  |                          |                  |                          |         |                          |                       |                          |               |                          |                   |                          |          |                          |           |                          |                 |                          |         |                          |        |                          |                      |                          |      |                          |        |                          |                              |                          |                                 |                          |                    |                          |                   |                          |               |                          |             |                          |                 |                          |         |                          |            |                          |              |                          |                |                          |  |  |
| Description Work Order Deviation                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                          |                                                                                                                        |                          | Disposition                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                          |                       |                          |                                                                                 |                          |                       |                          |          |                          |                     |                          |                     |                          |               |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |  |  |                 |                          |               |                          |                  |                          |                  |                          |         |                          |                       |                          |               |                          |                   |                          |          |                          |           |                          |                 |                          |         |                          |        |                          |                      |                          |      |                          |        |                          |                              |                          |                                 |                          |                    |                          |                   |                          |               |                          |             |                          |                 |                          |         |                          |            |                          |              |                          |                |                          |  |  |
| Root Cause                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                          |                                                                                                                        |                          | FAULT CATEGORY                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                          |                       |                          |                                                                                 |                          |                       |                          |          |                          |                     |                          |                     |                          |               |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |  |  |                 |                          |               |                          |                  |                          |                  |                          |         |                          |                       |                          |               |                          |                   |                          |          |                          |           |                          |                 |                          |         |                          |        |                          |                      |                          |      |                          |        |                          |                              |                          |                                 |                          |                    |                          |                   |                          |               |                          |             |                          |                 |                          |         |                          |            |                          |              |                          |                |                          |  |  |
| <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 20%;">Operator</td> <td><input type="checkbox"/></td> </tr> <tr> <td>Manufacturing Process</td> <td><input type="checkbox"/></td> </tr> <tr> <td>Equip/Tooling</td> <td><input type="checkbox"/></td> </tr> <tr> <td>Handling/Preservation</td> <td><input type="checkbox"/></td> </tr> <tr> <td>Material</td> <td><input type="checkbox"/></td> </tr> <tr> <td>Product Improvement</td> <td><input type="checkbox"/></td> </tr> <tr> <td>Process Improvement</td> <td><input type="checkbox"/></td> </tr> <tr> <td>Human Factors</td> <td><input type="checkbox"/></td> </tr> </table> |                          |                                                                                                                        |                          | Operator                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | <input type="checkbox"/> | Manufacturing Process | <input type="checkbox"/> | Equip/Tooling                                                                   | <input type="checkbox"/> | Handling/Preservation | <input type="checkbox"/> | Material | <input type="checkbox"/> | Product Improvement | <input type="checkbox"/> | Process Improvement | <input type="checkbox"/> | Human Factors | <input type="checkbox"/> | <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 20%;">Pressure/Forced</td> <td><input type="checkbox"/></td> <td style="width: 20%;">Contamination</td> <td><input type="checkbox"/></td> <td style="width: 20%;">Power Loss/Surge</td> <td><input type="checkbox"/></td> <td style="width: 20%;">Positioned Wrong</td> <td><input type="checkbox"/></td> </tr> <tr> <td>Bending</td> <td><input type="checkbox"/></td> <td>Misaligned/off center</td> <td><input type="checkbox"/></td> <td>Folio/Program</td> <td><input type="checkbox"/></td> <td>Outside Tolerance</td> <td><input type="checkbox"/></td> </tr> <tr> <td>Crushing</td> <td><input type="checkbox"/></td> <td>BOM/Route</td> <td><input type="checkbox"/></td> <td>Grain Direction</td> <td><input type="checkbox"/></td> <td>Drawing</td> <td><input type="checkbox"/></td> </tr> <tr> <td>Cracks</td> <td><input type="checkbox"/></td> <td>Broken/Damage/Defect</td> <td><input type="checkbox"/></td> <td>Weld</td> <td><input type="checkbox"/></td> <td>Finish</td> <td><input type="checkbox"/></td> </tr> <tr> <td>Crimp/Kink/Ripple/Wave/Twist</td> <td><input type="checkbox"/></td> <td>Incomplete/Unclear Instructions</td> <td><input type="checkbox"/></td> <td>Wrong Stock Pulled</td> <td><input type="checkbox"/></td> <td>Part Lost/Missing</td> <td><input type="checkbox"/></td> </tr> <tr> <td>Marks/Chatter</td> <td><input type="checkbox"/></td> <td>Drill Holes</td> <td><input type="checkbox"/></td> <td>Out of Sequence</td> <td><input type="checkbox"/></td> <td>Misread</td> <td><input type="checkbox"/></td> </tr> <tr> <td>Mislabeled</td> <td><input type="checkbox"/></td> <td>Fit/Function</td> <td><input type="checkbox"/></td> <td>Off-set/Set-up</td> <td><input type="checkbox"/></td> <td></td> <td></td> </tr> </table> |  |  |  | Pressure/Forced | <input type="checkbox"/> | Contamination | <input type="checkbox"/> | Power Loss/Surge | <input type="checkbox"/> | Positioned Wrong | <input type="checkbox"/> | Bending | <input type="checkbox"/> | Misaligned/off center | <input type="checkbox"/> | Folio/Program | <input type="checkbox"/> | Outside Tolerance | <input type="checkbox"/> | Crushing | <input type="checkbox"/> | BOM/Route | <input type="checkbox"/> | Grain Direction | <input type="checkbox"/> | Drawing | <input type="checkbox"/> | Cracks | <input type="checkbox"/> | Broken/Damage/Defect | <input type="checkbox"/> | Weld | <input type="checkbox"/> | Finish | <input type="checkbox"/> | Crimp/Kink/Ripple/Wave/Twist | <input type="checkbox"/> | Incomplete/Unclear Instructions | <input type="checkbox"/> | Wrong Stock Pulled | <input type="checkbox"/> | Part Lost/Missing | <input type="checkbox"/> | Marks/Chatter | <input type="checkbox"/> | Drill Holes | <input type="checkbox"/> | Out of Sequence | <input type="checkbox"/> | Misread | <input type="checkbox"/> | Mislabeled | <input type="checkbox"/> | Fit/Function | <input type="checkbox"/> | Off-set/Set-up | <input type="checkbox"/> |  |  |
| Operator                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | <input type="checkbox"/> |                                                                                                                        |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                          |                       |                          |                                                                                 |                          |                       |                          |          |                          |                     |                          |                     |                          |               |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |  |  |                 |                          |               |                          |                  |                          |                  |                          |         |                          |                       |                          |               |                          |                   |                          |          |                          |           |                          |                 |                          |         |                          |        |                          |                      |                          |      |                          |        |                          |                              |                          |                                 |                          |                    |                          |                   |                          |               |                          |             |                          |                 |                          |         |                          |            |                          |              |                          |                |                          |  |  |
| Manufacturing Process                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | <input type="checkbox"/> |                                                                                                                        |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                          |                       |                          |                                                                                 |                          |                       |                          |          |                          |                     |                          |                     |                          |               |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |  |  |                 |                          |               |                          |                  |                          |                  |                          |         |                          |                       |                          |               |                          |                   |                          |          |                          |           |                          |                 |                          |         |                          |        |                          |                      |                          |      |                          |        |                          |                              |                          |                                 |                          |                    |                          |                   |                          |               |                          |             |                          |                 |                          |         |                          |            |                          |              |                          |                |                          |  |  |
| Equip/Tooling                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | <input type="checkbox"/> |                                                                                                                        |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                          |                       |                          |                                                                                 |                          |                       |                          |          |                          |                     |                          |                     |                          |               |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |  |  |                 |                          |               |                          |                  |                          |                  |                          |         |                          |                       |                          |               |                          |                   |                          |          |                          |           |                          |                 |                          |         |                          |        |                          |                      |                          |      |                          |        |                          |                              |                          |                                 |                          |                    |                          |                   |                          |               |                          |             |                          |                 |                          |         |                          |            |                          |              |                          |                |                          |  |  |
| Handling/Preservation                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | <input type="checkbox"/> |                                                                                                                        |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                          |                       |                          |                                                                                 |                          |                       |                          |          |                          |                     |                          |                     |                          |               |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |  |  |                 |                          |               |                          |                  |                          |                  |                          |         |                          |                       |                          |               |                          |                   |                          |          |                          |           |                          |                 |                          |         |                          |        |                          |                      |                          |      |                          |        |                          |                              |                          |                                 |                          |                    |                          |                   |                          |               |                          |             |                          |                 |                          |         |                          |            |                          |              |                          |                |                          |  |  |
| Material                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | <input type="checkbox"/> |                                                                                                                        |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                          |                       |                          |                                                                                 |                          |                       |                          |          |                          |                     |                          |                     |                          |               |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |  |  |                 |                          |               |                          |                  |                          |                  |                          |         |                          |                       |                          |               |                          |                   |                          |          |                          |           |                          |                 |                          |         |                          |        |                          |                      |                          |      |                          |        |                          |                              |                          |                                 |                          |                    |                          |                   |                          |               |                          |             |                          |                 |                          |         |                          |            |                          |              |                          |                |                          |  |  |
| Product Improvement                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | <input type="checkbox"/> |                                                                                                                        |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                          |                       |                          |                                                                                 |                          |                       |                          |          |                          |                     |                          |                     |                          |               |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |  |  |                 |                          |               |                          |                  |                          |                  |                          |         |                          |                       |                          |               |                          |                   |                          |          |                          |           |                          |                 |                          |         |                          |        |                          |                      |                          |      |                          |        |                          |                              |                          |                                 |                          |                    |                          |                   |                          |               |                          |             |                          |                 |                          |         |                          |            |                          |              |                          |                |                          |  |  |
| Process Improvement                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | <input type="checkbox"/> |                                                                                                                        |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                          |                       |                          |                                                                                 |                          |                       |                          |          |                          |                     |                          |                     |                          |               |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |  |  |                 |                          |               |                          |                  |                          |                  |                          |         |                          |                       |                          |               |                          |                   |                          |          |                          |           |                          |                 |                          |         |                          |        |                          |                      |                          |      |                          |        |                          |                              |                          |                                 |                          |                    |                          |                   |                          |               |                          |             |                          |                 |                          |         |                          |            |                          |              |                          |                |                          |  |  |
| Human Factors                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | <input type="checkbox"/> |                                                                                                                        |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                          |                       |                          |                                                                                 |                          |                       |                          |          |                          |                     |                          |                     |                          |               |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |  |  |                 |                          |               |                          |                  |                          |                  |                          |         |                          |                       |                          |               |                          |                   |                          |          |                          |           |                          |                 |                          |         |                          |        |                          |                      |                          |      |                          |        |                          |                              |                          |                                 |                          |                    |                          |                   |                          |               |                          |             |                          |                 |                          |         |                          |            |                          |              |                          |                |                          |  |  |
| Pressure/Forced                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | <input type="checkbox"/> | Contamination                                                                                                          | <input type="checkbox"/> | Power Loss/Surge                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | <input type="checkbox"/> | Positioned Wrong      | <input type="checkbox"/> |                                                                                 |                          |                       |                          |          |                          |                     |                          |                     |                          |               |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |  |  |                 |                          |               |                          |                  |                          |                  |                          |         |                          |                       |                          |               |                          |                   |                          |          |                          |           |                          |                 |                          |         |                          |        |                          |                      |                          |      |                          |        |                          |                              |                          |                                 |                          |                    |                          |                   |                          |               |                          |             |                          |                 |                          |         |                          |            |                          |              |                          |                |                          |  |  |
| Bending                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | <input type="checkbox"/> | Misaligned/off center                                                                                                  | <input type="checkbox"/> | Folio/Program                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | <input type="checkbox"/> | Outside Tolerance     | <input type="checkbox"/> |                                                                                 |                          |                       |                          |          |                          |                     |                          |                     |                          |               |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |  |  |                 |                          |               |                          |                  |                          |                  |                          |         |                          |                       |                          |               |                          |                   |                          |          |                          |           |                          |                 |                          |         |                          |        |                          |                      |                          |      |                          |        |                          |                              |                          |                                 |                          |                    |                          |                   |                          |               |                          |             |                          |                 |                          |         |                          |            |                          |              |                          |                |                          |  |  |
| Crushing                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | <input type="checkbox"/> | BOM/Route                                                                                                              | <input type="checkbox"/> | Grain Direction                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | <input type="checkbox"/> | Drawing               | <input type="checkbox"/> |                                                                                 |                          |                       |                          |          |                          |                     |                          |                     |                          |               |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |  |  |                 |                          |               |                          |                  |                          |                  |                          |         |                          |                       |                          |               |                          |                   |                          |          |                          |           |                          |                 |                          |         |                          |        |                          |                      |                          |      |                          |        |                          |                              |                          |                                 |                          |                    |                          |                   |                          |               |                          |             |                          |                 |                          |         |                          |            |                          |              |                          |                |                          |  |  |
| Cracks                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | <input type="checkbox"/> | Broken/Damage/Defect                                                                                                   | <input type="checkbox"/> | Weld                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | <input type="checkbox"/> | Finish                | <input type="checkbox"/> |                                                                                 |                          |                       |                          |          |                          |                     |                          |                     |                          |               |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |  |  |                 |                          |               |                          |                  |                          |                  |                          |         |                          |                       |                          |               |                          |                   |                          |          |                          |           |                          |                 |                          |         |                          |        |                          |                      |                          |      |                          |        |                          |                              |                          |                                 |                          |                    |                          |                   |                          |               |                          |             |                          |                 |                          |         |                          |            |                          |              |                          |                |                          |  |  |
| Crimp/Kink/Ripple/Wave/Twist                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | <input type="checkbox"/> | Incomplete/Unclear Instructions                                                                                        | <input type="checkbox"/> | Wrong Stock Pulled                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | <input type="checkbox"/> | Part Lost/Missing     | <input type="checkbox"/> |                                                                                 |                          |                       |                          |          |                          |                     |                          |                     |                          |               |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |  |  |                 |                          |               |                          |                  |                          |                  |                          |         |                          |                       |                          |               |                          |                   |                          |          |                          |           |                          |                 |                          |         |                          |        |                          |                      |                          |      |                          |        |                          |                              |                          |                                 |                          |                    |                          |                   |                          |               |                          |             |                          |                 |                          |         |                          |            |                          |              |                          |                |                          |  |  |
| Marks/Chatter                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | <input type="checkbox"/> | Drill Holes                                                                                                            | <input type="checkbox"/> | Out of Sequence                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | <input type="checkbox"/> | Misread               | <input type="checkbox"/> |                                                                                 |                          |                       |                          |          |                          |                     |                          |                     |                          |               |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |  |  |                 |                          |               |                          |                  |                          |                  |                          |         |                          |                       |                          |               |                          |                   |                          |          |                          |           |                          |                 |                          |         |                          |        |                          |                      |                          |      |                          |        |                          |                              |                          |                                 |                          |                    |                          |                   |                          |               |                          |             |                          |                 |                          |         |                          |            |                          |              |                          |                |                          |  |  |
| Mislabeled                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | <input type="checkbox"/> | Fit/Function                                                                                                           | <input type="checkbox"/> | Off-set/Set-up                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | <input type="checkbox"/> |                       |                          |                                                                                 |                          |                       |                          |          |                          |                     |                          |                     |                          |               |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |  |  |                 |                          |               |                          |                  |                          |                  |                          |         |                          |                       |                          |               |                          |                   |                          |          |                          |           |                          |                 |                          |         |                          |        |                          |                      |                          |      |                          |        |                          |                              |                          |                                 |                          |                    |                          |                   |                          |               |                          |             |                          |                 |                          |         |                          |            |                          |              |                          |                |                          |  |  |
| Completed By                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                          |                                                                                                                        |                          | Lead hand / Supervisor                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                          |                       |                          |                                                                                 |                          |                       |                          |          |                          |                     |                          |                     |                          |               |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |  |  |                 |                          |               |                          |                  |                          |                  |                          |         |                          |                       |                          |               |                          |                   |                          |          |                          |           |                          |                 |                          |         |                          |        |                          |                      |                          |      |                          |        |                          |                              |                          |                                 |                          |                    |                          |                   |                          |               |                          |             |                          |                 |                          |         |                          |            |                          |              |                          |                |                          |  |  |
| QC / QA Coordinator                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                          |                                                                                                                        |                          | Other/Details:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                          |                       |                          |                                                                                 |                          |                       |                          |          |                          |                     |                          |                     |                          |               |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |  |  |                 |                          |               |                          |                  |                          |                  |                          |         |                          |                       |                          |               |                          |                   |                          |          |                          |           |                          |                 |                          |         |                          |        |                          |                      |                          |      |                          |        |                          |                              |                          |                                 |                          |                    |                          |                   |                          |               |                          |             |                          |                 |                          |         |                          |            |                          |              |                          |                |                          |  |  |